

**Work Order ID 108583****\*108583\***

Page 1

Wednesday, October 23, 2013 7:24:25 AM

Item ID: D2651-3 Accept **\*N900040100\*** Setup Start **\*NS1\***  
Revision ID: Stop **\*NS2\***  
Item Name: O-Ring  
Start Date: 10/23/2013 Start Qty: 175.00 **\*175\*** Cust Item ID:  
Required Date: 10/25/2013 Req'd Qty: 175.00 **\*175\*** Customer:  
Reference:

Approvals: Process Plan: CZ Date: 13/10/23 Tooling: \_\_\_\_\_ Date: \_\_\_\_\_ Run Start **\*NR1\***  
QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_ Stop **\*NR2\***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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Draw Nbr	Revision Nbr
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D2651	Rev B
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100

0.00

**\*100\***

PURCHASING

Purchasing

Memo

0.00

Purchasing

Issue P/O: 21769 Purchase P/N: MS28775-008 as per Dwg  
D2651 Supplier: Parker Ensure Certificate of Conformity is attached

CZ 13/10/23 175

110

Receive &amp; Inspect for Damage &amp; Mat'l Certs

0.00

**\*110\***

Packaging

Memo

0.00

Packaging

Ensure material certification is attached

P 13/10/28 (175)

120

QC6- Inspect dimensions to drawing

0.00

**\*120\***

QC

Memo

0.00

Quality Control

Ensure Material certification comply to Dwg D3446

DAS  
27  
9-89

13 10-28175

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____				<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		<b>AGAINST DEPARTMENT/PROCESS</b>  <div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/>            Machining <input type="checkbox"/>            Thermoforming <input type="checkbox"/>            Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/>            Small Fab <input type="checkbox"/>            Finishing <input type="checkbox"/>            Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/>            Prod. Eng. Coord. <input type="checkbox"/>            Rec/Store/Packaging <input type="checkbox"/>            Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/>            Quality <input type="checkbox"/>            Other <input type="checkbox"/> </div> </div>					
<b>Root Cause</b>	<b>Date</b>	<b>Step</b>	<b>Qty</b>	<b>Description of work order update or Non-conformance</b>	<b>Initial Chief Eng</b>	<b>Action Description</b>	<b>Sign &amp; Date</b>	<b>Verification</b>	<b>QC Inspector</b>		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											
<b>FAULT CATEGORY</b>											
<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled  <input type="checkbox"/> Other		

# Work Order ID 108583

**\*108583\***

Page 2

Wednesday, October 23, 2013 7:24:25 AM

Item ID: D2651-3 Accept **\*N900040100\*** Setup Start **\*NS1\***  
 Revision ID: Stop **\*NS2\***  
 Item Name: O-Ring  
 Start Date: 10/23/2013 Start Qty: 175.00 **\*175\*** Cust Item ID:  
 Required Date: 10/25/2013 Req'd Qty: 175.00 **\*175\*** Customer:  
 Reference:

Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_ Tooling: \_\_\_\_\_ Date: \_\_\_\_\_ Run Start **\*NR1\***  
 QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_ Stop **\*NR2\***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
130	Identify as per dwg & Stock Location: _____	0.00							
<b>*130*</b>									
Packaging	Memo <i>F-PWJ</i>	0.00							
Packaging									
140	QC21- Final Inspection - Work Order Release	0.00							
<b>*140*</b>									
QC	Memo	0.00							
Quality Control									

DAS  
32  
9-89

*13/14/29*

*(175)*

*Rm 13/10/29*

*ME*  
*13-10-29*

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
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Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

**FAULT CATEGORY**

Landing Gear	General	Other
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection Incomplete
<input type="checkbox"/> Crushed/Crimped	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions Incomplete/Unclear
<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Mislabeled
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Misread
<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Offset
<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Calibration
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Sequence
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio	<input type="checkbox"/> Outside Dimensions
		<input type="checkbox"/> Ovalized
		<input type="checkbox"/> Over/Under tolerance
		<input type="checkbox"/> Part Incorrect
		<input type="checkbox"/> Part Lost/Missing
		<input type="checkbox"/> Part Moved
		<input type="checkbox"/> Positioned Wrong
		<input type="checkbox"/> Power Loss/Surge
		<input type="checkbox"/> Pressure/Forced
		<input type="checkbox"/> Temperature/Cure
		<input type="checkbox"/> Weld
		<input type="checkbox"/> Wrong Stock Pulled
		<input type="checkbox"/> Other

# Picklist Print

Wednesday, October 23, 2013 7:24:25 AM

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Work Order ID: 108583

Parent Item: D2651-3

Parent Item Name: O-Ring

Start Date: 10/23/2013

Required Date: 10/25/2013

Start Qty: 175.00

Required Qty: 175.00

Comments: IPP rev. A 06.02.15 new issue EC

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
MS28775-008 O RING		Purchased	No			100	Each	0.0000	1	175		10/23/13	

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

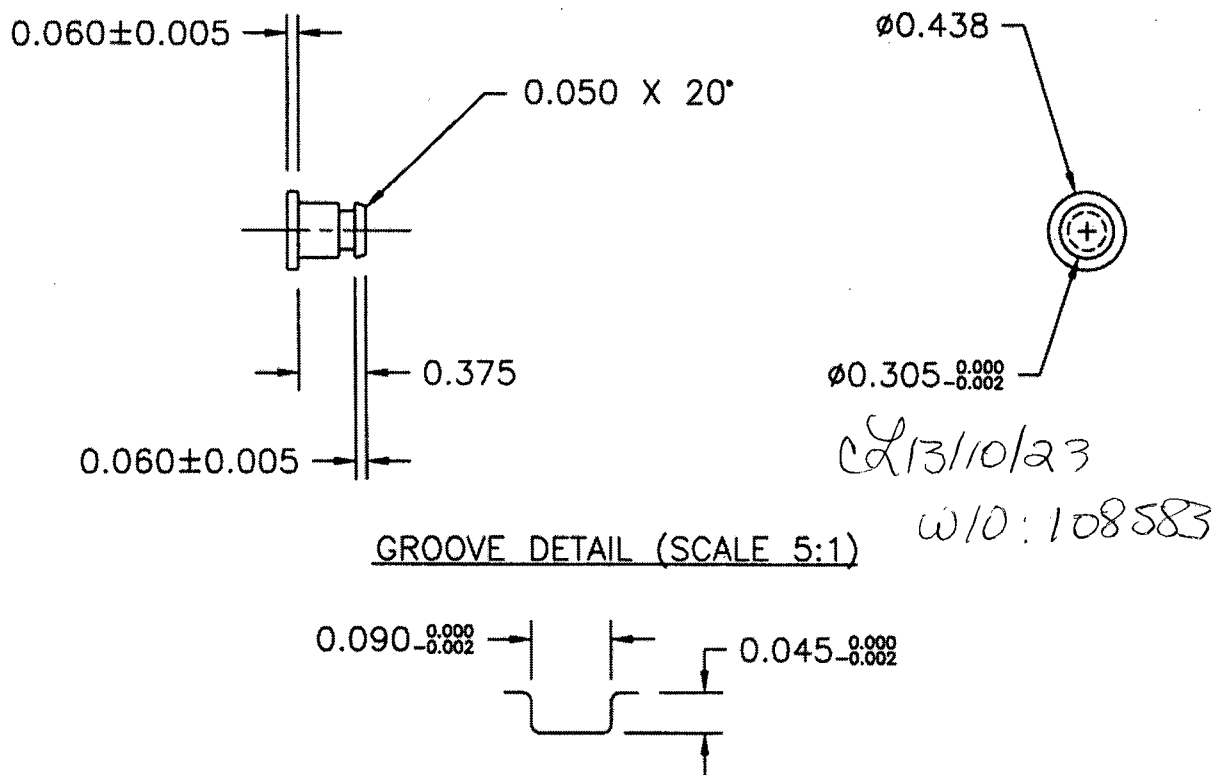
Work Order: _____  Part No. _____  NCR No. _____				<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		<b>AGAINST DEPARTMENT/PROCESS</b>  <div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/>            Machining <input type="checkbox"/>            Thermoforming <input type="checkbox"/>            Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/>            Small Fab <input type="checkbox"/>            Finishing <input type="checkbox"/>            Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/>            Prod. Eng. Coord. <input type="checkbox"/>            Rec/Store/Packaging <input type="checkbox"/>            Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/>            Quality <input type="checkbox"/>            Other <input type="checkbox"/> </div> </div>					
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Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											
<b>FAULT CATEGORY</b>											
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DESIGN <i>[Signature]</i>	DRAWN BY <i>[Signature]</i>	DART AEROSPACE LTD HAWKESBURY, ONTARIO, CANADA	
CHECKED <i>[Signature]</i>	APPROVED <i>[Signature]</i>	DRAWING NO. D2651	REV. B SHEET 1 OF 1
DATE 03.12.19		TITLE PLUG	SCALE 1:1
A	97.03.25	NEW ISSUE	
B	03.12.19	ADD POWDER COAT, MS28775-008	

RELEASED  
03.12.19 *[Signature]*

### D2651-1 PLUG:



### D2651-1 PLUG

- 1) MATERIAL: 6061-T6 (QQ-A-225/8) OR 1100-0 (QQ-A-225/1)
- 2) FINISH: ACID ETCH & ALODINE PER DART QSI 005 4.1  
POWDER COAT WHITE (4.3.5.1) PER DART QSI 005 4.3
- 3) TOLERANCES ARE PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) ALL DIMENSIONS ARE IN INCHES
- 5) BREAK ALL SHARP EDGES 0.010 MAX

### D2651-3 O-RING

- 1) MATERIAL: BUNA N, 70 DUROMETER  
3/16 ID, 5/16 OD, 1/16 WIDTH  
(PARKER 2-008, MS28775-008 OR EQUIVALENT)

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NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
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Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

**FAULT CATEGORY**

Landing Gear	General	Other
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection Incomplete
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<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance
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<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Calibration
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<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio	<input type="checkbox"/> Outside Dimensions
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		<input type="checkbox"/> Part Moved
		<input type="checkbox"/> Positioned Wrong
		<input type="checkbox"/> Power Loss/Surge
		<input type="checkbox"/> Pressure/Forced
		<input type="checkbox"/> Temperature/Cure
		<input type="checkbox"/> Weld
		<input type="checkbox"/> Wrong Stock Pulled
		<input type="checkbox"/> Other



10/25/13

## CUSTOMS INVOICE/PACKING SHEET



3724243-00

Cust#: 41513

SOLD TO: B/E AEROSPACE  
CONSUMABLES MANAGEMENTATTN LESLIE MENIEUR  
US

SHIP TO: DART AEROSPACE LTD

1270 ABERDEEN ST

HAWKESBURY, CA K6A 1K7

Pref. Routing A.O.G.: FEDX INTL P1 COLL

UPC VENDOR	INVOICE NO.	ON DOCK
000000	HPHVP1	10/22/13
PROMISED	REQUEST	SHIPPED
10/25/13	10/22/13	
CUSTOMER P.O.	CUSTOMER RELEASE	
P021769	8RV8V7	

CORRESPONDENCE TO: B/E AEROSPACE  
CONSUMABLES MANAGEMENT  
10000 N.W. 15th Terrace  
Miami, FL 33172

532680955758

P.O. NUMBER	ITEM NO.	PART NUMBER	ICN No.	QTY	UOM	UNIT PRICE	TOTAL VALUE	COUNTRY OF ORIGIN	QUANTITY ORDERED	QUANTITY B.O.	QUANTITY SHIPPED
OSVL82	1	MS28775-008		175.00	EA	0.10	17.50		175.00	0.00	175.00
		Desc: PACKING PCAT: S HS# 4016.93.0000	348475	175.00		Cure: 3Q2013		MX			
		MFR- Name: PARKER HANNIFIN CORP MFR-Product: NM304 MS28775-008 Revision: A MFR- Batch: 0081005514 IT IS HEREBY CERTIFIED THAT THE ITEM IDENTIFIED HEREIN CONFORMS TO AN ESTABLISHED INDUSTRY, U.S. GOVERNMENT, OR COMMERCIAL STANDARD. PARTS ARE BEING SHIPPED BY KAPCO ON BEHALF OF BE AEROSPACE CONSUMABLES MANAGEMENT. S/L: 15 YRS PER ARP5316 INSP BY: GuadalupeD 10/25/2013									

The merchandise listed has been produced in accordance with Fair Labor Standards Act of 1938 as amended.  
No claims allowed unless made within ten (10) days after receipts of Goods and in no case shall the liability  
assumed by us under the guarantees either expressed or implied, exceed the face value of the invoice for the  
merchandise in question.

These commodities, technology or software were exported from the United States in accordance with the  
Export Administration Regulations. Diversion contrary to U.S. Law is prohibited.

SHIPPED UNDER NLR HS#8803.30.0010 - ECCN: 9A991.D

COUNTRY OF ORIGIN: USA

TOTAL BOX VALUE:

17.50 USD

PAGE 1

FOR CUSTOMS PURPOSES ONLY. DO NOT PAY FROM THIS DOCUMENT.



## CERTIFICATE OF CONFORMANCE

WE HEREBY CERTIFY THAT THE PRODUCT SUPPLIED IS NEWLY MANUFACTURED, CONFORMS TO THE  
APPROVED DESIGN DATA, AND MEETS ALL REQUIREMENTS OF THE APPLICABLE PURCHASE ORDER.  
EVIDENCE OF CONFORMANCE IS ON FILE AND AVAILABLE FOR REVIEW UPON REQUEST.

PETE CURTI  
CORPORATE VICE PRESIDENT OF QUALITYThank You For This Order  
PACKING LIST

MAIL REMITTANCE TO:  
Parker Hannifin Corporation  
(859) 269-2351



Oring Division  
Parker Hannifin Corporation  
(For Correspondence Only)  
P.O. Box 11751  
Lexington KY 40512-1751  
D.U.N.S. 05-682-5607



PACKING LIST  
416406

DATE SHIPPED  
9/03/13

PAGE 1

Carrier Signature

Send all PREPAID freight bills with a copy  
of the Bill of Lading for PAYMENT to  
ATTENTION: Parker Hannifin Corporation  
CARRIER: c/o William & Associates, Inc.  
405 East 78th Street  
Bloomington, MN 55420-1269

F.O.B.

C

SHIP VIA

PREFERRED SHIPP

# BOXES

WEIGHT

TRACKING NUMBER

SOLD TO: 483996

SHIP TO: 001

KAPCO VALTEC BREA WAREHOUSE  
3120 E ENTERPRISE ST  
BREA CA 92821

KAPCO  
3120 E. ENTERPRISE ST  
BREA, CA 92821

BIN	BAGS	AIAG	ASN
14	1	AIAG	

MASTER SHIP# 416339

SPECIAL SHIPPING INSTRUCTIONS

FEDX # 090022016

\*\*\*PARTIALS NOT ALLOWED UNLESS AUTHORIZED\*\*\*  
\*\*\*SHIP COMPLETE\*\*\*

SHIPPING COMMENTS

1. PUT ALL PAPERWORK INSIDE BOX, DO NOT STAPLE PAPERWORK TOGETHER
2. PARTIALS ARE NOT ALLOWED UNLESS AUTHORIZED!!
3. NO MORE THAN 4 BATCHES PER P/N

ITEM: 0001

SO/ITH: 346349/0001 PO: 351892-00

ORD QTY: 10000

PART#: NM304 MS28775-008

B/O QTY: 0 REQ DATE: 09/03/13

CUST PART: MS28775-008

REV: A

SHIPPED QTY: 10000

BATCH: 0081005514 LOT: C0747943 CURE: 3Q2013 BATCH QTY: 10000 COO: MX

HARD(SHORE A): 0077 TENS(PSI): 1725 ELONG(X): 0176 S.G.: 1.2800 MOD(PSI): 0912

DESCRIPTION: PACKING

B/E AEROSPACE, INC-CONSUMABLES MANAGEMENT QUALITY

CLAUSES PER QAP 33.0 02/21/13: ABCDHPUV

GENERAL NOTES:

PRODUCT IS BEING PROCURED BASED UPON A  
LICENSING AGREEMENT BETWEEN B/E AEROSPACE, INC-CONSUMABLES MANAGEMENT  
AND KAPCO FOR HONEYWELL PROPRIETARY PRODUCTS.

THE ABOVE LINE ITEM(S) WILL MEET THE REQUIREMENTS OF B/E AEROSPACE,  
INC-CONSUMABLES MANAGEMENT QUALITY CLAUSES AS LISTED ON THIS PURCHASE  
ORDER.

IF PRODUCT IS SHELF LIFE SENSITIVE, THERE MUST BE A MINIMUM OF 80% SH  
ELF

LIFE REMAINING ON PRODUCT AT TIME OF RECEIVAL AT KAPCO.

ALL CERTIFICATIONS MUST REFLECT LATEST REVISION LEVELS FOR DRAWING,  
MATERIALS AND PROCESS SPECS. ANY VARIANCE TO THIS REQUIREMENT MUST BE  
APPROVED BY KAPCO PRIOR TO SHIPMENT.

FOR HONEYWELL PROPRIETARY PARTS IF (A) IS INDICATED AFTER THE MATERIAL  
OR

PROCESS ON THE KAPCO QC-101 PLANNING VENDOR MUST VERIFY IF THE SOURCE  
SUPPLYING THE MATERIAL OR COMPLETING THE PROCESS REQUIRES HONEYWELL  
APPROVAL.

TO VERIFY APPROVALS GO TO [HTTPS://WWW.SUPPLIER.HONEYWELL.COM](https://www.supplier.honeywell.com)

(CONTACT KAPCO BUYER IF YOU DO NOT HAVE ACCESS)

-- CONTINUED --

THIS IS A COPY OF THE ORIGINAL  
CERTIFICATION AS DELIVERED  
TO KAPCO

RECEIVED  
SEP 10 2013  
RA

PACKING LIST AND CERTIFICATION OF CONFORMANCE

No Mercury, Mercury compounds or Mercury bearing instruments, equipment or apparatus which  
might cause contamination has been used in the manufacture or subsequent processing of material  
covered by this order.  
We hereby certify that these goods were produced in compliance with all applicable requirements of  
section 5, 7, and 12 of the Fair Labor Standards Act, as amended, and of regulations and orders of  
the United States Department of Labor issued under section 14 thereof.

Parker O-Ring Division certifies that this product conforms to specifications and requirements of the  
above Purchase Order. Material used in the manufacture of the parts identified above is traceable by  
the listed Control Batch identification number(s). The applicable test information is available for  
examination at our facility.

By   
RUBEN RAMIREZ - QUALITY ASSURANCE MANAGER

CLAIMS FOR DAMAGES MUST BE MADE WITHIN 30 DAYS



MAIL REMITTANCE TO:  
Parker Hannifin Corporation  
(859) 269-2351



O-ring Division  
Parker Hannifin Corporation  
(For Correspondence Only)  
P.O. Box 11751  
Lexington KY 40512-1751  
D.U.N.S. 05-682-5607



PACKING LIST  
416406

DATE SHIPPED  
9/03/13

Carrier Signature

Send all PREPAID freight bills with a copy  
of the Bill of Lading for PAYMENT to  
ATTENTION: PARKER: Parker Hannifin Corporation  
c/o William & Associates, Inc.  
405 East 78th Street  
Bloomington, MN 55420-1299

PAGE 2

F.O.B.

C

SHIP VIA

PREFERRED SHIPP

# BOXES

WEIGHT

TRACKING NUMBER

SOLD TO: 483996

SHIP TO:001

KAPCO VALTEC BREA WAREHOUSE  
3120 E ENTERPRISE ST  
BREA CA 92821

KAPCO  
3120 E. ENTERPRISE ST  
BREA, CA 92821

BIN	BAGS	AIAG	ASN
14	1	AIAG	

MASTER SHIP# 416339

SPECIAL SHIPPING INSTRUCTIONS

FEDX # 090022016

\*\*\*PARTIALS NOT ALLOWED UNLESS AUTHORIZED\*\*\*

\*\*\*SHIP COMPLETE\*\*\*

SHIPPING COMMENTS

1. PUT ALL PAPERWORK INSIDE BOX, DO NOT STAPLE PAPERWORK TOGETHER
2. PARTIALS ARE NOT ALLOWED UNLESS AUTHORIZED!!
3. NO MORE THAN 4 BATCHES PER P/N

IF MATERIAL OR PROCESS IS NOT LISTED ON THE HONEYWELL SITE VENDOR IS  
REQUIRED TO ADHERE TO APPROVALS LISTED WITHIN THE SPEC OR ADHERE TO  
APPROVED SOURCES AS DIRECTED BY THE SPEC.

ANY DEVIATION TO THIS PURCHASE PLANNER MUST BE APPROVED IN WRITING BY  
KAPCO SUPPLIER QUALITY OR PURCHASING AGENT PRIOR TO PRODUCTION.

PLANNER REVISION A-000

REFERENCE NUMBER: 018000

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covered by this order.

We hereby certify that these goods were produced in compliance with all applicable requirements of  
section 6, 7, and 12 of the Fair Labor Standards Act, as amended, and of regulations and orders of  
the United States Department of Labor issued under section 14 thereof.

CLAIMS FOR DAMAGES MUST BE MADE WITHIN 30 DAYS

Parker O-Ring Division certifies that this product conforms to specifications and requirements of the  
above Purchase Order. Material used in the manufacture of the parts identified above is traceable by  
the listed Control Batch identification number(s). The applicable test information is available for  
examination at our facilities.

By   
RUBEN RAMIREZ - QUALITY ASSURANCE MANAGER





**Parker Hannifin Corporation**  
 PARKER SEALS DE MATAMOROS ORD  
 DIAG. LORENZO DE LA GARZA #13  
 CD IND. MATAMOROS TAM, MEXICO  
 PHONE: (859) 335-3000

--- NOTICE ---  
**This is a C.B.I. Compound!**

C.B.I. is Parker's exclusive quality assurance program for Controlled Batch Identification, your assurance of reliability.

### CONFORMANCE CERTIFICATE FOR MATERIAL SHIPPED

Parker O-Ring Division certifies that the material used in the manufacture of the parts identified below and called for on Purchase Order Number 351892-00 received by us from KAPCO is traceable by the Control Batch Identification (CBI) number(s): 0081005514

Parker O-Ring Division also certifies that CBI tests have been performed on the batch of material used to manufacture such parts. These tests are pre-production batch acceptance tests and the results of such tests are set forth below. Data that supports these results is on file with Parker. See the applicable Parker catalog for further information concerning these preproduction tests.

SHIPMENT DATE: 09/03/13

CUSTOMER PART NUMBER	PARKER PART NUMBER	COMPOUND	QUANTITY
MS28775-008	REV A MS28775-008	NM304-75	10000
PARKER FINDINGS:			
BATCH #	CURE	HARDNESS	TENSILE
0081005514	3Q13	77	1725
		ELONG	S.G.
		176	1.28
		MODULUS	QTY
		912	10000

THE REMAINING SHELF LIFE SHALL BE DETERMINED BY UTILIZING THE CURE DATE LISTED ABOVE AND APPLYING THE APPLICABLE SHELF LIFE GUIDELINES AS LISTED IN ARP 5316, ASSUMING PROPER STORAGE CONDITIONS.

THIS IS A COPY OF THE ORIGINAL  
 CERTIFICATION AS DELIVERED  
 TO KAPCO

No Mercury, Mercury compounds or Mercury bearing instruments, equipment or apparatus which might cause contamination has been used in the manufacture or subsequent processing of material covered by this order.


Purchaser use only. Reproduce only in full. Data pertains to items referenced.

The recording of false, fictitious or fraudulent statements or entries on the certificate may be punishable as a felony under federal law.

The information contained herein is submitted as the privileged and confidential property of the Parker Hannifin Corporation pursuant to 5 U.S.C. Section 552 (b)(3) and (b)(4), the Freedom of Information Act, exemption Number 3 and Number 4. This information shall not be duplicated, used or disclosed in whole or in part outside the recipient organization without express written consent of the Parker Hannifin Corporation.

#### O-Ring Division PARKER HANNIFIN CORPORATION

By

  
 Ruben Ramirez  
 Quality Assurance Manager





**Parker Hannifin Corporation**  
 O-Ring Division  
 Parker Seal de Matamoros  
 Diagonal Lorenzo De La Garza #13 Ciudad  
 H. Matamoros, Tam. 87499, Mexico  
 Phone: (859) 335-3000

--- NOTICE ---  
**This is a C.B.I. Compound!**

C.B.I. is Parker's exclusive quality assurance program for Controlled Batch Identification, your assurance of reliability.

### CONFORMANCE CERTIFICATE FOR MATERIAL SHIPPED

Parker O-Ring Division certifies that the material used in the manufacture of the parts identified below and called for on Purchase Order Number 351892-00 received by us from KAPCO is traceable to C.B.I. Number 0081005514 and that the material used conforms to the requirements of the specifications indicated below. The tests were performed in accordance with these specifications, and data supporting the indicated results are on file.

CUSTOMER PART NUMBER	PARKER PART NUMBER	COMPOUND	QUANTITY	CURE DATE	SHIP DATE
MS28775-008	MS28775-008	NH304 -75	10000	3Q13	09/03/13
REV: A	TESTED AS: 2-214				
SPECIFICATION MIL-P-25732	REV C		LOT C0747943	TESTED ON: 09/03/13	
TEST RESULTS			REQUIREMENTS MIN MAX	PARKER FINDINGS	
ASTM D297	HYDROSTAT	SPECIFIC GRAVITY	1.26 1.30	1.28	
ASTM D2240	SHORE A	HARDNESS	70 80	77	
ASTM D1414		TENSILE STRENGTH, PSI	1489 2233	1725	
ASTM D1414		ELONGATION %	160 222	176	
ASTM D1414		MODULUS AT 100 %	500	912	
ASTM D1414	ASTM D1329	TR-10 ORIGINAL, DEGREE F	-49	-51	
FLUID TESTING					
ASTM D1414	ASTM D471	MIL-PRF-5606H 70 HRS @ 275F HARDNESS CHANGE	-15 5	-10	
ASTM D1414	ASTM D471	VOLUME CHANGE	1.0 20.0	16.0	
ASTM D1414	ASTM D395	COMPRESSION SET			
ASTM D1414		DEFLECTION %	55.0	26.0	
ASTM D1414	ASTM D1329	TR-10 OIL, DEGREE F	-49	-52	

Testing Performed By PSDM Lab  
 Diagonal Lorenzo De La Garza #13 Ciudad  
 H. Matamoros, Tam. 87499, Mexico

CAGE CODE: 02697

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O-Ring Division  
**PARKER HANNIFIN CORPORATION**

By

RUBEN RAMIREZ  
 Quality Assurance Manager

